



249 N MILLER SAGINAW, MI 48609
 PH: 989.781.0150 FAX: 989.781.0290
 EMAIL: WATERSEWER@THOMASTWP.ORG

SELLER TO NEW OWNER UTILITY BILLING TRANSFER AUTHORIZATION

CURRENT PROPERTY OWNER: _____

PROPERTY ADDRESS: _____
(ADDRESS) (CITY, STATE & ZIP)

I AM SELLING THIS PROPERTY TO: _____
(FIRST NAME) (LAST NAME)

I REQUEST A FINAL WATER/SEWER READING ON: _____
(DATE)

FORWARDING ADDRESS FOR FINAL BILL: _____
(ADDRESS) (CITY, STATE & ZIP)

I UNDERSTAND THAT AS THE PROPERTY OWNER I AM ULTIMATELY RESPONSIBLE FOR ALL UTILITY PAYMENTS INCLUDING ANY CURRENT BALANCES. ALL ACCOUNTS NEED TO BE CURRENT FOR CONTINUED SERVICE.

SELLER SIGNATURE

PHONE #

WOULD YOU LIKE YOUR FINAL BILL EMAILED? YES NO

EMAIL ADDRESS: _____

PLEASE RETURN THIS FORM WITH A COPY OF YOUR PHOTO I.D.

IS YOUR UTILITY BILLING ACCOUNT SET UP TO DIRECT DEBIT? YES NO

IF YES, PLEASE COMPLETE THE FOLLOWING...

I, _____
(FIRST NAME) (LAST NAME)

REQUEST THOMAS TOWNSHIP TO STOP DIRECT DEBIT LOCATED AT: _____
(BANK/CREDIT UNION NAME)

****Direct Debit must be removed from your account prior to your Final Bill. Final Bill payments can be made in our office with Cash, Check or Money Order or on our website with a Credit or Debit Card.**

SELLER SIGNATURE

TODAY'S DATE